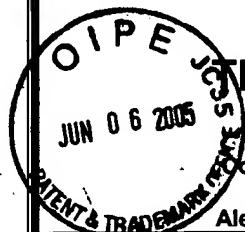


JF 11

REQUEST

FOR

**CONTINUED EXAMINATION
(RCE)
TRANSMITTAL**

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

<i>Application Number</i>	09/767,894
<i>Filing Date</i>	01/22/2001
<i>First Named Inventor</i>	RECEIVED McCARTHY et al. JUN 09 2005
<i>Art Unit</i>	2133 OFFICE OF PETITIONS
<i>Examiner Name</i>	Abraham, Esaw T.
<i>Attorney Docket Number</i>	3123-342

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO).

1. Submission required under 37 CFR 1.114a. Previously submitted

- i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).
- ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. Other _____

b. Enclosed

- i. Amendment/Reply to Office Action of March 1, 2004
- ii. Affidavit(s)/Declaration(s)
- iii. Information Disclosure Statement (IDS)
- iv. Other

2. Miscellaneous

- a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)

- b. Other _____

3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.a. Payment by credit card (Form PTO-2038 enclosed)

- i. RCE fee required under 37 CFR 1.17(e)
- ii. Extension of time fee (37 CFR 1.136 and 1.17)
- iii. Other

b. Check in the amount of \$ _____ enclosedc. The Director is hereby authorized to charge any deficiencies in payment of fees to Deposit Account 50-2198.

05/07/2005 JARLINAN 000000090 09767894
750.00 00
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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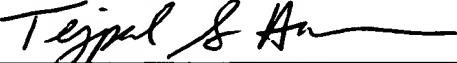
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<i>Examiner Name</i>	Abraham, Esaw T.
<i>Attorney Docket Number</i>	3123-342

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type) Tejpal S. Hansra	Registration No. (Attorney/Agent) 38,172
Signature 	Date JUNE 1, 2005

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type) Tejpal S. Hansra	
Signature 	Date JUNE 1, 2005